

3

PATENT
ATTORNEY DOCKET NO: 50069/002002

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **TARGETED TRANSSCLERAL CONTROLLED RELEASE DRUG DELIVERY TO THE RETINA AND CHOROID**, the specification of which

☐ is attached hereto.

☒ was filed on January 5, 2000 as Application Serial No. 09/478,099
and was amended on _____

☐ was described and claimed in PCT International Application No. _____
filed on _____ and as amended under PCT Article 19 on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56(a).

FOREIGN PRIORITY RIGHTS: I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

Country	Serial Number	Filing Date	Priority Claimed?
			Yes/No

PROVISIONAL PRIORITY RIGHTS: I hereby claim priority benefits under Title 35, United States Code, §119(e) and §120 of any United States provisional patent application(s) listed below filed by an inventor or inventors on the same subject matter as the present application and having a filing date before that of the application(s) of which priority is claimed:

Serial Number	Filing Date	Status
60/114,905	January 5, 1999	Pending

COMBINED DECLARATION AND POWER OF ATTORNEY

NON-PROVISIONAL PRIORITY RIGHTS: I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose all information I know to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application:


Serial Number	Filing Date	Status

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Paul T. Clark, Reg. No. 30,162, Karen L. Elbing, Ph.D., Reg. No. 35,238, Kristina Bleker-Brady, Ph.D., Reg. No. 39,109, Susan M. Michaud, Ph.D., Reg. No. 42,885, Mary Rose Scozzafava, Ph.D., Reg. No. 36,268, James D. DeCamp, Ph.D., Reg. No. 43,580.

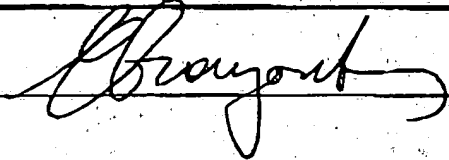
Address all telephone calls to: Paul T. Clark at 617/428-0200.

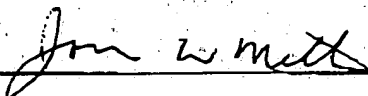
Address all correspondence to: Paul T. Clark at Clark & Elbing LLP, 176 Federal Street, Boston, MA 02110.

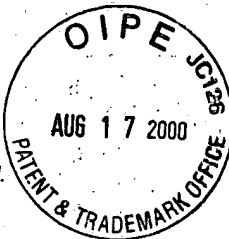
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Anthony P. Adamis	15 Pond Circle	Boston, MA 02130	United States
Signature: 			Date: 6-5-00

COMBINED DECLARATION AND POWER OF ATTORNEY

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Evangelos S. Gragoudas	15 Fairfield Drive	Lexington, MA 02420	United States
Signature: 			Date: 6/22/00

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Joan W. Miller	40 Westland Avenue	Winchester, MA 01890	Canada
Signature: 			Date: 6/22/00



ATTORNEY DOCKET NO. 50069/002002

Applicant or Patente : Anthony P. Adamis et al.
 Serial or Patent No. : 09/478,099
 Filed or Issued : January 5, 2000
 Title : Targeted Transscleral Controlled Release Drug Delivery to the Retina and Choroid

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
 (37 CFR 1.9(f) and 1.27(d)) - NONPROFIT ORGANIZATION

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

Name of Organization: Massachusetts Eye and Ear Infirmary
 Address of Organization: 243 Charles Street, Boston, MA 02114
 Type of Organization:

- ☐ University or Other Institution of Higher Education
☒ Tax Exempt under Internal Revenue Service Code (26 USC 501(a) and 501(c)(3))
☐ Nonprofit Scientific or Educational under Statute of State of the United States of America
 Name of State:
 Citation of Statute:
☐ Would Qualify as Tax Exempt under Internal Revenue Service Code (26 USC 501(a) and 501(c)(3)) If Located in the United States of America
☐ Would Qualify as Nonprofit Scientific or Educational under Statute of State of the United States of America If Located in the United States of America
 Name of State:
 Citation of Statute:

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 C.F.R. 1.9(e) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code with regard to the invention entitled: Targeted Transscleral Controlled Release Drug Delivery to the Retina and Choroid by Inventors Anthony P. Adamis, Evangelos S. Gragoudas, and Joan W. Miller described in

- ☐ the specification filed herewith.
☒ application serial no. 09/478,099, filed January 5, 2000.
☐ patent no. [**PATENT NUMBER**], issued [**ISSUE DATE**].

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

Full Name:

Address:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☒ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name: Elayn G. Byron

Title: Director, Office of Research Administration

Address: Massachusetts Eye and Ear Infirmary, 243 Charles St., Boston, MA 02114

Signature: Elayn G. Byron

Date: 7/25/00